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FILED

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BOARD OF PHARMACY

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF PHARMACY

IN THE MATTER OF THE SUSPENSION :
OR REVOCATION OF THE LICENSE OF :

Administrative Action

Denise Gonshery, R.P. :
License No.: 28RI01953700 :

ORDER OF REINSTATEMENT

TO PRACTICE PHARMACY IN THE :
STATE OF NEW JERSEY :

This matter was opened to the New Jersey State Board of Pharmacy ("the Board") upon receipt of the application of Denise Gonshery ("Respondent") for reinstatement of her license to practice pharmacy in this State. Board records reflect that Respondent agreed to a suspension of her license by way of Consent Order dated October 19, 2005 following her termination from Virtua Memorial Hospital after she tested positive for alcohol use.

In support of her application for reinstatement, Respondent testified under oath before the Board on February 11, 2009. Respondent has been continuously enrolled in the Professional Assistance Program of New Jersey (PAP) since the suspension of her license to practice pharmacy. As part of her participation with the PAP, Respondent regularly undergoes random urine testing,

meets with a therapist every two weeks and attends Alcoholics Anonymous (AA) meetings. She has been in stable, documented recovery for two years and has been employed as a bank teller for over a year. Respondent testified that her participation in therapy and AA meetings has assisted her in learning how to handle stressful situations without turning to alcohol. The meetings and her AA sponsor also provide a safe outlet for her to discuss stressful issues that may develop in her life. Dr. Edward Reading of the PAP also appeared on February 11, 2009 and testified that the PAP supports Respondent's application for licensure reinstatement with certain monitoring restrictions.

Respondent plans for return to pharmacy practice including practice in a hospital setting and she has maintained currency in the field of pharmacy by taking continuing education coursework. She provided the Board with documentation of 43.5 credit hours of continuing education taken within the last year.

Laurie Deerfield, Psy.D submitted a report on Respondent's behalf in which Dr. Deerfield states that Respondent has an increased understanding of her illness and internal motivation to remain sober. Dr. Deerfield recommends that Respondent should be allowed to practice pharmacy again with certain monitoring and therapy requirements. Dawn Gillespie, LCADC also submitted a report on Respondent's behalf. Ms. Gillespie notes that she sees Respondent on a twice monthly basis and that Respondent has shown significant improvement since entering treatment and that her motivation to stay sober remains strong.

Respondent, being desirous of resolving this matter without the necessity of further formal proceedings, and agreeing to waive any right to same, and the Board having determined that Respondent has engaged in substantial recovery efforts and this Order is sufficiently protective of the public health, safety and welfare, and all parties agreeing to the terms of this Order;

ACCORDINGLY, IT IS on this 4th day of MARCH
ORDERED THAT:

2009
2008, 009.

1. Respondent's license shall be reinstated following her provision to the Executive Director of the Board of the following documents which shall all be to the satisfaction of the Board:

- a. Proof of successful completion of all application requirements including a Criminal History Background Check and payment of all reinstatement fees.

2. After respondent has complied with all the requirements of paragraph one of this Order to the satisfaction of the Board, respondent's license to practice pharmacy shall be reinstated subject to the conditions in paragraphs three through seven of this Order.

3. Respondent will comply fully with the monitoring program established for her by the PAP. Such monitoring program shall include but not be limited to:

- a. Absolute abstinence from all psychoactive substances including alcohol unless prescribed by a treating health care professional aware of her substance abuse history for a documented medical condition and with notification from the treating health care professional to the executive medical director of the PAP of the diagnosis and treatment regime within five days of issuing the prescription. Respondent shall advise all of her treating health care practitioners, who prescribe medications, of her addiction history and shall be responsible to ensure that the treating health care professional notifies the PAP of any prescription for a psychoactive substance within five days of issuance of the prescription. Respondent shall also personally notify the PAP of any prescription for psychoactive substance within five days of issuance of the prescription.
- c. Respondent shall attend support group meetings of Alcoholics Anonymous at a frequency of not less than three meetings per week. Respondent shall provide evidence of attendance at such groups directly to the PAP on a form or in a manner as required by the PAP.
- d. Respondent shall undergo random witnessed urine monitoring under the supervision of the PAP on an unannounced basis, at a frequency of no less than 2 times per week for the first twelve months following Respondent's return to practice. Subsequent reductions in the frequency of urine screens shall be at the direction of the executive medical director of the PAP consistent with Respondent's duration in recovery with prior notification to the State Board of Pharmacy. All test results shall be provided in the first instance directly to the PAP and any positive result shall be reported immediately by the PAP to the Executive Director of the Board.

- e. The Board reserves the right to require a modification of the manner of the random witnessed urine testing by the PAP in the event technical developments or individual requirements indicate that a different methodology or approach is required to guarantee the accuracy and reliability of the testing.
- f. Respondent's failure to submit to or provide a urine sample within twenty-four hours of a request shall be deemed to be the equivalent of a confirmed positive urine test and shall be deemed a violation of this order unless Respondent is unable to appear for a scheduled urine test due to illness or other impossibility. Respondent must advise the Board in writing within two (2) days, and cause the PAP to so advise the Board in writing within (2) days, of a claimed illness or impossibility. If Respondent fails to appear for a scheduled urine test due to illness, Respondent shall provide to the Board, written substantiation of the illness in the form of a physician's report, within two (2) days. "Impossibility" means an obstacle beyond the control of Respondent that is insurmountable or that makes her appearance for the urine test so infeasible that a reasonable person would waive Respondent's requirement to give the urine sample that day.
- g. All random witnessed alcohol and drug screens shall be negative for the presence of alcohol or drugs, unless the drugs detected by screening were taken for a documented illness pursuant to a valid prescription from a health care practitioner aware of Respondent's substance abuse history. All positive results shall be confirmed by the Gas Chromatography Mass Spectrometry (GC/MS) testing method. Chain of custody documentation must accompany all laboratory reports and/or the laboratory reports must indicate that chain of custody procedures have been followed.
- h. Any urine test result showing creatinine levels below 20 mg/dl and a specific gravity below 1.003 shall create a rebuttable presumption of a confirmed positive urine test, and shall be followed by a confirming test. The method of the confirming test shall be determined by the PAP.
- i. Respondent shall become familiar with all foods, food additives or other products (such as poppy seeds) which may affect the validity of urine screens, be presumed to possess that knowledge, and shall refrain from the use of such substances. Respondent specifically agrees that ingestion of such substances shall not be an acceptable reason for a positive urine screen and/or failure to comply with the urine monitoring program.
- j. Respondent shall submit to continued monitoring by the PAP and shall meet with the PAP on a face-to-face basis at least once a month for a minimum of one year following Respondent's return to practice, with subsequent reductions at the direction of the executive medical director of the PAP consistent with Respondent's duration in recovery and with prior notification to the State Board of Pharmacy.

- k. Respondent shall be responsible to ensure that the PAP shall supply reports every ninety (90) days beginning on the “filed” date of this Order to the Board regarding her progress with the monitoring program and with the conditions set forth by the Board of Pharmacy in this Consent Order.
 - l. Respondent shall obtain the agreement of the PAP via a signature of its representative on this Order to notify the Board within 24 hours of its receipt of information of any noncompliant behavior, slip or relapse of impairment, including but not limited to any positive urine screen or failure to appear for urine monitoring or any scheduled appointment or any discontinuance of the PAP rehabilitation program whether initiated by Respondent or by the PAP.
 - m. Respondent expressly waives any claim to privilege or confidentiality that she may have concerning reports and disclosures to the Board, and use by the Board of that information in any license proceedings, including reports and disclosures by the urine monitoring program, or the PAP, or any other person or entity involved in her rehabilitation program.
 - n. All costs associated with the monitoring outlined above shall be the responsibility of, and paid directly by, Respondent.
4. For a period of two years following the entry of this Order, a copy of this Order shall be provided to all employers where a pharmacy license is required for employment or where the respondent has access to medication, prescriptions or patient profiles. The respondent shall ensure that each employer notifies the Board in writing that he or she has received this Order prior to respondent beginning employment. The respondent shall inform the Board in writing of any employment changes, including periods of unemployment, and shall also provide a detailed description of her job, role and responsibilities.
5. For a period of two years following the entry of this Order, Respondent shall not act as a preceptor or a pharmacist-in-charge (RPIC) at any pharmacy and shall not own or have an ownership interest in any pharmacy.
6. For a period of two years following entry of this Order, Respondent hereby consents to the entry of an Order of automatic suspension of license without notice, upon the Board’s receipt

of any information which the Board in its sole discretion deems reliable that Respondent has failed to comply with any of the conditions set forth above, any other provision of this Order, any report of a confirmed positive urine, or a prima facie showing of a relapse or recurrence of the use of alcohol or a psychoactive substance which is not prescribed by a treating health care professional with notification to the PAP as described in ordered paragraph 3a.

7. Respondent shall have the right to apply for removal of the automatic suspension on five (5) days notice but in such event shall be limited to a showing that the urine tested was not hers or was a false positive in the case of urine testing, or that other information submitted was false.

NEW JERSEY STATE BOARD OF PHARMACY

By: Edward McGinley
Edward McGinley, R.P.,
President

I have read the within Order
and understand its terms. I
consent to the entry of this
Order by the New Jersey Board
of Pharmacy.

Denise C. Gonschery
Denise Gonschery, R.P.

L. E. Baxter, Sr.
Louis E. Baxter, Sr., M.D., FASAM
Medical Director
Physicians Assistance Program